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\*\* FOREIGN APPLICATIONS \*\*\*\*\* /ad/  
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Verified and Acknowledged	/ANNETTE FREDHICKA DIXON/ Examiner's Signature		<input type="checkbox"/> Met after Allowance <small>Initials</small>	UNITED KINGDOM	15	36 13 /ad/	2 3 / ad/

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**TITLE**

Pre-metered dose magazine for dry powder inhaler

FILING FEE RECEIVED 1398	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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